COMBINATION DECLARATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

Monitoring Respiratory Movements Device

The specification of which was filed on November 6, 2003 as PCT International Application No. PCT/US2003/035474.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s))		Priority Claimed
P 020104280 (Number)	Argentina (Country)	07 November 2002 (Day/Month/Yr. Filed)	☑ yes □ no
I hereby claim the benefit unde listed below.	r 35 U.S.C. § 119(e) of a	any United States Provisiona	al Application(s)
(Application Serial No.)	(Filing Date)		
I hereby claim the benefit unde listed below and, insofar as the in the prior United States applie States Code, §112, I acknowled Code of Federal Regulations, § and the national or PCT interna-	subject matter of each of cation in the manner produce the duty to disclose ration 1.56(a) which occurred	of the claims of this application of the claims of this application of the first paragraph material information as define the filing date of the f	on is not disclosed of Title 35, United and Title 37,
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, aba	— ndoned)

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punished by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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POWER OF ATTORNEY: As a named inventor, I hereby appoint

Practioners Associated with the

Customer Number:

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as my/our attorney(s) and/or agent(s) to prosecute this application and to Patent and Trademark Office connected therewith.	ansact all business in the			
The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from the Assignee of this application as to any action to be taken in the United States Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned.				
DIRECT TELEPHONE CALLS TO:				
Bruce S. Londa (212) 808-0700				
FULL NAME OF SOLE OR FIRST INVENTOR: Carlos Daniel SILVA				
INVENTOR'S SIGNATURE:	DATE: <u>66/69/06</u>			
RESIDENCE: Calle 43 n°, 183 – La Plata, Buenos Aires, ARGENTINA CITIZENSHIP: Argentina	AR			
POST OFFICE ADDRESS: Same as above				